U.S. Department of Justice

United States Marshals Service

PROCESS RECEIPT AND RETURN

See "Instructions for Service of Process by U.S. Marshal"

Signature of Attorney other Originator requesting service on behalf of: PLAINTIFF	SE NUMBER KMW-SAK
NAME OF INDIVIDUAL, COMPANY, CORPORATION. ETC. TO SERVE OR DESCRIPTION OF PRESERVE AT The Bank, N.A. ADDRESS (Street or RFD. Apartment No., City. State and ZIP Code) 501 Mickle Boulevard, Camden, NJ 08103 SEND NOTICE OF SERVICE COPY TO REQUESTER AT NAME AND ADDRESS BELOW Number of processerved with this case of the Berger Law Group, P.C. 919 Conestoga Road, Bldg. 3, Suite 114 Bryn Mawr, PA 19010 Check for service on U.S. A SPECIAL INSTRUCTIONS OR OTHER INFORMATION THAT WILL ASSIST IN EXPEDITING SERVICE (Include But All Telephone Numbers, and Estimated Times Available for Service): AT 8:30 Signature of Attorney other Originator requesting service on behalf of: Defendant AT 8:30 SPACE BELOW FOR USE OF U.S. MARSHAL ONLY—DO NOT WRITE Expensions of the Individual company of the Individual company, corporation, etc., at the address shown above on the on the individual, company, corporation, etc. Thereby certify and return that I am unable to locate the individual, company, corporation, etc. named above (See remark Name and title of individual served (if not shown above) Prove I alloy Str. Marsh. Address (complete only different than shown above) Date	ROCESS
SERVE AT DBank, N.A. ADDRESS (Street or RFD. Apartment No., City. State and ZIP Code) 501 Mickle Boulevard, Camden, NJ 08103 SEND NOTICE OF SERVICE COPY TO REQUESTER AT NAME AND ADDRESS BELOW Phillip D. Berger, Esquire Berger Law Group, P.C. 919 Conestoga Road, Bldg. 3, Suite 114 Bryn Mawr, PA 19010 SPECIAL INSTRUCTIONS OR OTHER INFORMATION THAT WILL ASSIST IN EXPEDITING SERVICE (Include But All Telephone Numbers, and Estimated Times Available for Service): AT 8:30 Signature of Attorney other Originator requesting service on behalf of: SPACE BELOW FOR USE OF U.S. MARSHAL ONLY—DO NOT WRITE E Lacknowledge receipt for the total number of process indicated. (Sign only for USM 285 if more than one USM 285 is submitted) I hereby certify and return that 1 have personally served. have legal evidence of service. have executed as shown on the individual, company, corporation, etc., at the address shown above on the on the individual, company, corporation, etc. named above (See remark. Name and title of individual served (if not shown above) Flow Malley Street Marsel. Address (complete only different than shown above) Date Address (complete only different than shown above) Date	recution
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Flower Malloy Start Marajers Address (complete only different than shown above) Date	
Address (complete only different than shown above) Date	erson of suitable age and discretion residing in defendant's usual place bode
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	e of U.S. Marshal or Deputy 1. Charles Ki
Service Fee Total Mileage Charges including endeavors) Forwarding Fee Total Charges Advance Deposits Amount owed to (Amount of Refi	U.S Marshal* or nd*)
	\$0.00
REMARKS:	

- PRINT 5 COPIES: 1. CLERK OF THE COURT 2. USMS RECORD

 - 3. NOTICE OF SERVICE
 - 4. BILLING STATEMENT*: To be returned to the U.S. Marshal with payment, if any amount is owed. Please remit promptly payable to U.S. Marshal.
 - 5. ACKNOWLEDGMENT OF RECEIPT

PRIOR EDITIONS MAY BE USED